PA			
	Application Number	09/844,153	
TRANSMITT	Filing Date	April 27, 2001	
FORMER	First Named Inventor	Eydelman	
(to be used for all correspondence after initial filing)	Group Art Unit	2155	
	Examiner Name	P. Tran	

			Examiner Name	ė		r. IIaii
Sent via Express Mail Label No.:			Attorney Docket Number MS 126551.04		MS 126551.04	
ENCLOSURES (check all that apply)						
□ Fee Attached □ Response to Office Action (16 pages) □ After Final □ Affidavits/declaration(s) □ Extension of Time Request □ Express Abandonment Request □ Information Disclosure Statement with Form PTO/SB/08A (pages) □ Response to Notice to File Missing Parts □ A copy of the Notice to File Missing Parts Under 37 CFR 1.52 or 1.5 CERTIFICATE OF MAILING OR TRANSMISSION (Under 37 CFR § 1.8(a)) I hereby certify that this correspondence is being: ☑ deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents P.O. Box 1450, Alexandria, VA 22313-1450; or □ transmitted by facsimile on the date shown below to the USPTO at (703)	Assignment (for an Ap) Drawing(s) Declaration Newly A copy (37 CF) Licensing- Petition Petition to Application Power of A Change of Terminal I Request fo		nent Papers Application) g(s) (sheets) tion and Power of A ly Executed (pa py from a prior ap CFR 1.63(d)) (p. ng-related Papers to Convert to a Pro	Attorney ges) plication ages) ovisional		After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Application Data Sheet Request for Corrected Filing Receipt Return Receipt Postcard Other Enclosure(s) (please identify below): Statement under 37 CFR 3.73(b) Copy of Patent Assignment current (4 pages)
Date Signature Rimma N. Oks Printed Name	Remarks The Commissioner is hereby authorized to charge any additional fees required, or credit any overpayments, to Deposit Account No. 50-0463 for the above identified patent application.					
SIGNATURE OF ATTORNEY OR AGENT						
Signature Varid ! 2		Reg.	No.	38,222		
Name of Attorney or Agent		David	I S. Lee			
Date January 26, 2005	Tel.	-+	425) 703-809			acsimile No. (425) 708-5046
Assignee Name: MICROSOFT CORPO ONE MICROSOFT WA REDMOND, WA 9805		·Υ	rion			
Customer Number:		22971				

OTPE 1018

Effective on 12/06/14
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R.

3. APPLICATION SIZE FEE

Non-English Specification,

-100 =

Total Sheets

4. OTHER FEE(S)

FEE TRANSMITTAL For FY 2005

For FY 2005	First Named Inventor	Eydelman
101112003	Examiner Name	P. Tran
☐ Applicant claims small entity status. See 37 CFR 1.27	Art Unit	2155
Applicant claims small entity status, dec 57 of K 1.27	Attorney Docket No.	MS 126551.04

Application Number

Filing Date

Complete if Known

09/844,153

April 27, 2001

Fee Paid (\$)

Fees Paid (\$)

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TOTAL AMOUNT OF PAYMENT (\$) 0.00 N/A Express Mail Label No. METHOD OF PAYMENT (check all that apply) Check Credit Card ☐ Money Order None Other (please identify): Deposit Account Name: MICROSOFT CORPORATION Deposit Account Deposit Account Number: 50-0463 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee □ Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES Small Entity** Small Entity **Small Entity** Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 500 200 150 250 100 Design 200 100 100 130 50 65 200 Plant 100 300 150 160 80 Reissue 300 300 150 500 250 600 Provisional 200 100 0 0 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee (\$) Fee Description 50 25 Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 200 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 100 Multiple dependent claims 180 **Extra Claims** Fee (\$) Fee Paid (\$) **Multiple Dependent Claims** 37 or HP= $\overline{0}$ × 50 = 0.00 Fee (\$) Fee Paid (\$) HP =highest number of total claims paid for, if greater than 20 0 0 **Extra Claims** Indep. Claims Fee (\$) Fee Paid (\$) - 2 or HP = 0 HP = highest number of independent claims paid for, if greater than 3

Other:		0
SUBMITTED BY		
Signature Pavil ! L	Registration No. (Attorney/Agent) 38,222	Telephone (425) 703-8092
Name (Print/Type: David S. Lee		Date Tayon 76 2005

Number of each additional 50 or fraction thereof Fee (\$)

(round up to a whole) number x

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

/ 50 =

\$130 fee (no small entity discount)

IN THE UNITED STATES PASENT AND TRADEMARK OFFICE

Application Serial No.:	09/844153
Filing Date:	
Inventors:	
Applicant:	. Microsoft Corporation
Group Art Unit:	
Examiner:	
Confirmation No.:	1777
Applicant's Docket No.:	126551.04
Applicant's Docket No.:	

RESPONSE TO OFFICE ACTION DATED DECEMBER 6, 2004 REQUEST FOR RECONSIDERATION

To:

MS: Amendment

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

From:

David S. Lee

Customer No. 38991

Sir:

In response to the Office Action of December 6, 2004, in connection with the above-identified application, the following remarks are submitted. Favorable consideration is respectfully requested.